PTO/SB/22 (07-09) Approved for use through 07/31/2012. OMB 0651-0031

Under the Paperwork Reduction Act of 1995, no persons are require			. DEPARTMENT OF COMMERCE displays a valid OMB control number	
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)		
FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		00	7048010US	
Application Number 10/560,069-Conf.		Filed	December 9, 2005	
IMMUNOMODULATING COMPOSITIONS, USES THEREFORE AND PROCESSES FOR THEIR				
PRODUCTIONS				
Art Unit 1644		Examiner	A. E. Juedes	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$130	Small Entity Fe \$65	<u>ee</u> \$	
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$	
X Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ 555.00	
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$	
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$	
X Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2283				
WARNING: Information on this form may become public. Credit card information should not be included on this form.				
Provide credit card information and authorization on PTO-2038.				
applicant inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
x attorney or agent of record. Registration Number 48,511			·	
attorney or agent under 37 CFR 1.34.				
Registration number if acting under 37 CFR 1.34				
Moreston King hais		Dece	mber 10, 2009	
Signature	Signature		Date	
Joseph W. Ricigliano			2) 628-6600	
Typed or printed name		Telep	phone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
Total of1 forms are submitted.				
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing				
system in accordance with § 1.6(a)(4).				
Dated: (Downetta Teagle-Tate)				